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COMMENCEMENT ADDRESS

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(GREETINGS TO HOSTS, GUESTS, FRIENDS, ETC.)

FIRST, LET ME THANK YOU FOR THE HONOR YOU'VE GIVEN ME TODAY. I DO APPRECIATE IT VERY MUCH, FOR I KNOW THAT THIS IS A GREAT UNIVERSITY AND YOU CAN HAVE YOUR PICK OF PEOPLE TO COME TO THIS PODIUM.

AND THIS IS A VERY IMPORTANT DAY NOT ONLY FOR THOSE OF YOU WHO ARE GRADUATING, BUT ALSO FOR YOUR FAMILIES AND YOUR FRIENDS. I WOULD GUESS THAT MANY OF YOU ARE NOW THE FIRST ONES IN YOUR FAMILIES TO COMPLETE A COLLEGE EDUCATION AND, THEREFORE, YOU'RE MUCH BETTER EQUIPPED TO TAKE ADVANTAGE OF MORE OPTIONS IN LIFE THAN YOUR PARENTS HAD.

AND THAT'S THE WAY IT SHOULD BE, IN OUR SOCIETY.

WHICH LEADS ME TO REMIND YOU THAT YOU DON'T REACH YOUR GRADUATION DAY BY BRAIN-POWER ALONE ... ALTHOUGH IT CERTAINLY HELPS. YOU GET HERE WITH THE POWER OF THE HEART AS WELL ... THE ENORMOUS POWER GENERATED BY THE LOVE AND AFFECTION THAT OTHERS HAVE FOR YOU.

THAT'S THE REAL POWER THAT KEEPS YOU GOING DURING THOSE DARK PERIODS WHEN YOU'RE ABSOLUTELY POSITIVE YOU CANNOT TAKE ANOTHER STEP.

BUT YOU DO. BECAUSE THE PEOPLE WHO ARE CLOSE TO YOU AND WHO LOVE YOU AND BELIEVE IN YOU ... THEY WANT YOU TO KEEP GOING. AND YOU KNOW IT. AND SO YOU DO KEEP GOING.

I SUPPOSE THERE ARE SOME ENGINEERING AND PRE-ENGINEERING STUDENTS GRADUATING TODAY. AND I GUESS YOU'VE STUDIED PHYSICS AND CHEMISTRY AND ALL THE OTHER SUBJECTS THAT DEAL WITH ENERGY, FUELS, AND POWER.

BUT IN MY BOOK THERE'S NO ENERGY SOURCE MORE POWERFUL ANYWHERE IN THE WORLD THAN A PARENT OR A SPOUSE WHO LOOKS YOU IN THE EYE AND SAYS, "YOU'RE DOING OKAY ... BUT I JUST KNOW YOU'LL DO BETTER TOMORROW."

SO, YOU CAN HAVE YOUR SOLAR POWER AND YOUR GAS POWER AND YOUR WIND POWER. I'LL TAKE FAMILY POWER ANYTIME.

I HAVE LOTS MORE THINGS TO SAY TO YOUR PARENTS AND SIBLINGS AND FRIENDS. BUT THIS IS YOUR DAY ... AND, IN ANY CASE, I REALLY DO WANT TO TALK SERIOUSLY WITH YOU ABOUT AN ISSUE THAT HAS BEEN WORRYING THE COUNTRY FOR SOME TIME -- BUT WHICH, I'M AFRAID, IS NOW ON YOUR PLATE ... YOU, AS TODAY'S GRADUATES AND TOMORROW'S COMMUNITY AND NATIONAL LEADERS.

YOU KNOW, THERE ARE RESPONSIBILITIES THAT COME WITH YOUR NEW POSITION AS THE MOVERS AND SHAKERS OF MASSACHUSETTS ... AND OF AMERICA. AND ONE OF THOSE RESPONSIBILITIES IS TO BE KNOWLEDGEABLE AND CRITICAL -- IN THE POSITIVE SENSE OF THAT WORD -- REGARDING THE DELIVERY OF HEALTH CARE IN THIS COUNTRY.

THAT'S THE ISSUE I WANT TO TALK ABOUT. AND IT'S A BIG ONE.

TO BEGIN WITH, THIS IS A TIME IN WHICH WE HAVE VERY HIGH EXPECTATIONS FOR MEDICINE AND HEALTH. WE'VE PUT A GREAT DEAL OF FAITH INTO NEW TECHNOLOGIES, NEW PHARMACEUTICALS, NEW SURGICAL PROCEDURES, AND SO ON, AND WE CONTINUE TO HAVE FAITH IN THE MAGIC OF MEDICINE.

WE ROUTINELY EXPECT MIRACLES TO HAPPEN -- EVEN THOUGH THE REAL WORLD OF MEDICINE ISN'T ALWAYS ABLE TO DELIVER. WE HAVE THAT SITUATION RIGHT NOW WITH AIDS.

FOR THE PAST 7 YEARS, SCIENTISTS AND CLINICIANS HAVE BEEN WORKING AROUND-THE-CLOCK TO UNDERSTAND AND CONQUER THE DISEASE OF AIDS. BUT IT STILL REMAINS A MYSTERY. I'M SORRY TO SAY THIS, BUT I DOUBT THAT WE'LL GET FULL CONTROL OVER THE AIDS VIRUS BEFORE THE TURN OF THE CENTURY.

BUT, AS FAR AS THE GENERAL PUBLIC IS CONCERNED, THE AIDS SITUATION IS THE EXCEPTION AND NOT THE RULE. THE AMERICAN PEOPLE STILL MAINTAIN HIGH HOPES FOR WHAT MEDICINE AND HEALTH CARE CAN DO FOR THEM.

BUT I THINK IT'S ALSO BECOMING CLEAR THAT THOSE HIGH EXPECTATIONS ARE FAST OUT-RUNNING OUR ABILITY TO PAY FOR THEM. IN OTHER WORDS, WE HAVE A CLEAR GAP IN OUR SOCIETY TODAY BETWEEN WHAT WE WOULD LIKE TO SEE HAPPEN IN HEALTH CARE ... AND WHAT CAN REALISTICALLY HAPPEN IN HEALTH CARE.

AND SO THE AMERICAN PEOPLE ARE ENGAGED IN A DEBATE IN RESPECT TO ASPIRATIONS VERSUS RESOURCES. IT'S A DEBATE THAT TOUCHES ON MANY ASPECTS OF AMERICAN LIFE ... BUT I'LL FOCUS JUST ON HEALTH CARE, WHICH IS PROFOUNDLY AFFECTED BY THAT GROWING TENSION BETWEEN ASPIRATIONS AND RESOURCES.

SOME CRITICS WILL SAY THAT THE CHIEF CAUSE IS THE BUDGET DEFICIT. ONCE WE GET RID OF THE DEFICIT, SAY THESE CRITICS, WE WILL ALSO GET RID OF THAT GAP BETWEEN ASPIRATIONS AND RESOURCES ... BETWEEN DREAMS AND REALITY.

MAYBE ... BUT I DON'T THINK SO. WELL BEFORE WE HAD A BUDGET PROBLEM, WE ALREADY HAD A HEALTH CARE ECONOMY THAT CONSISTENTLY RAN AT AN ANNUAL INFLATION RATE THAT WAS 2 TO 3 TIMES THE INFLATION RATE FOR THE REST OF THE AMERICAN ECONOMY.

BUT WE DIDN'T SEE IT ... OR, IF WE DID SEE IT, WE PREFERRED NOT TO WORRY ABOUT IT.

TODAY, WE STILL HAVE AN INFLATED HEALTH CARE ECONOMY ... BUT WE ALSO HAVE INFLATED HEALTH CARE ASPIRATIONS. AND WE SIMPLY CAN'T AFFORD ANY INFLATION AT ALL.

WHEN I OR OTHER PEOPLE TALK LIKE THIS, OUR CRITICS COME BACK AT US AND SAY THAT THINGS REALLY AREN'T THAT BAD ... THAT ALL WE NEED TO DO IS PUT A REIMBURSEMENT CAP ON THIS ... OR CHANGE THE ELIGIBILITY REGULATIONS FOR THAT ... OR CUT BACK A LITTLE HERE ... OR PRUNE BACK A LITTLE THERE.

DURING 8 YEARS AS YOUR SURGEON GENERAL, I'VE LISTENED TO THESE DEBATES AND I'VE THOUGHT ABOUT THE TRUE HUMAN COSTS ASSOCIATED WITH THAT KIND OF A PATCHWORK APPROACH. AND TODAY I'M MORE CONVINCED THAN EVER THAT OUR WHOLE HEALTH CARE SYSTEM NEEDS TO BE STUDIED WITH AN EYE TO MAKING A NUMBER OF VERY MAJOR CORRECTIONS.

NOW, I CAN ALREADY HEAR THE CRITICS SAYING, "WAIT A MINUTE, DR. KOOP. THE SYSTEM AIN'T BROKE, SO DON'T FIX IT."

TO WHICH I WOULD REPLY, "YOU'RE WRONG. THE SYSTEM IS BROKE ... AND IT MUST BE FIXED."

HOSPITAL COSTS ARE STILL CLIMBING ... AND NO ONE CAN PROVE TO THE AMERICAN PEOPLE THAT THE QUALITY OF HOSPITAL-BASED CARE IS UNIFORMLY GOING UP AS WELL.

WORSE STILL, AS THE COST OF HOSPITAL-BASED CARE INCREASES, THE HOSPITALS THEMSELVES ARE TRYING TO NARROW THEIR PATIENT POOL ... FOR EXAMPLE, ELIMINATING THE NEED TO PROVIDE IN-PATIENT MEDICAL CARE FOR POOR AND DISADVANTAGED AMERICANS.

I SAY THERE'S SOMETHING TERRIBLY WRONG WITH A NATIONAL SYSTEM OF HEALTH CARE THAT CHARGES MORE AND MORE MONEY TO SERVE FEWER AND FEWER PEOPLE.

AND WE HAVE MUCH THE SAME PROBLEM IN RESPECT TO PHYSICIAN SERVICES AND FEES.

I CAN TELL YOU THAT MANY OF MY FRIENDS AND COLLEAGUES IN MEDICAL PRACTICE ARE TRYING TO DO WHAT THEY CAN TO INCREASE THE QUALITY OF CARE THEY DELIVER WITHOUT INCREASING THEIR COSTS. BUT THEY ARGUE THAT THEY HAVE LITTLE OR NO CONTROL OVER SOME OF THE INFLATIONARY THINGS THEY DO.

MAYBE SO ... LET'S FOR THE MOMENT GIVE THEM THE BENEFIT OF THE DOUBT. BUT THE FACT STILL REMAINS THAT PHYSICIAN FEES ARE GOING UP, AND THEY DO ADD TO A BURDEN ON THE PUBLIC THAT IS BECOMING INSUPPORTABLE.

AND, AGAIN -- AS WITH HOSPITAL-BASED CARE -- THE AMERICAN PEOPLE HAVE NOT BEEN ASSURED, IN ANY RATIONAL AND MEASURABLE WAY, THAT THE HIGHER COSTS OF A PHYSICIAN'S CARE WILL IN FACT BUY THEM A PROPORTIONATELY HIGHER QUALITY OF SUCH CARE.

WE SIMPLY DON'T KNOW. WE DON'T YET HAVE THE TOOLS OR THE MECHANISMS TO MAKE THOSE KINDS OF NECESSARY, MARKETPLACE JUDGMENTS.

BUT, BEFORE I GO ANY FURTHER, LET ME SAY THAT IN GENERAL I SUPPORT THE CONCEPT OF A LAISSEZ-FAIRE MARKETPLACE AND I BELIEVE IN A FREELY COMPETITIVE ECONOMY.

I THINK A LAISSEZ-FAIRE ECONOMY WORKS BEST FOR ALL OUR CITIZENS AND I'M THRILLED -- AS I'M SURE ALL AMERICANS ARE THRILLED -- TO SEE SO MANY COUNTRIES WITH STATE-CONTROLLED ECONOMIES COMING AROUND TO OUR POINT OF VIEW.

NOW, HAVING SAID THAT, LET ME GO ON TO SAY THAT THE HEALTH CARE MARKETPLACE IS LAISSEZ-FAIRE ... BUT IT'S NOT FREELY COMPETITIVE AND, HENCE, IT HAS VIRTUALLY NO MODERATING CONTROLS WORKING ON BEHALF OF THE CONSUMER, OR THE PATIENT.

IT MIGHT AS WELL BE STATE-CONTROLLED. THE EFFECT UPON THE CONSUMER IS ABOUT THE SAME.

IN MOST OTHER AREAS OF OUR ECONOMY, THE MARKETPLACE DOES EXERCISE SOME CONTROL OVER ARBITRARY RISES IN CHARGES TO THE CONSUMER. THERE REALLY IS COMPETITION. HERE AND THERE IT MIGHT BE RATHER THIN ... BUT IT DOES EXIST AND IT DOES PROVIDE SOME ASSURANCE THAT INEFFECTIVE, UNCOMPETITIVE, HIGH-COST, LOW-QUALITY ENTERPRISES WILL FAIL.

BUT IN HEALTH CARE, RIGHT ACROSS THE BOARD, PRICES HAVE GONE UP IRRESPECTIVE OF THE QUALITY OF CARE BEING DELIVERED OR OF ANY OTHER MARKETPLACE CONTROL.

AND FRANKLY I DON'T YET SEE THE MEDICAL PROFESSION ACHIEVING MUCH SUCCESS IN SELF-REGULATION. GRANTED, IT'S NO SIMPLE TASK. PHYSICIANS CAN HELP PUT THE BRAKES ON SOME GENERAL EXPENDITURES, BUT THERE ARE VERY FEW PHYSICIANS WHO CAN HONESTLY AND EFFECTIVELY CONTROL THE DELIVERY OF SERVICE -- MUCH LESS CONTROL THE COSTS OF THAT SERVICE -- WHILE CARING FOR A SPECIFIC, INDIVIDUAL PATIENT AT THE BEDSIDE.

WE SEEM TO HAVE, THEREFORE, A SYSTEM OF HEALTH CARE THAT'S DISTINGUISHED BY A VIRTUAL ABSENCE OF SELF-REGULATION, OR "SELF-CONTROL," ON THE PART OF THE PROVIDERS OF THAT HEALTH CARE -- THAT IS, HOSPITALS AND PHYSICIANS -- AND DISTINGUISHED AS WELL BY THE ABSENCE OF SUCH NATURAL MARKETPLACE CONTROLS AS COMPETITION IN REGARD TO PRICE, QUALITY, OR SERVICE.

WHAT IS THE EFFECT OF SUCH A SYSTEM ANYWAY?

ONE VERY SERIOUS EFFECT HAS BEEN THE EMERGENCE OF A THREE-TIER FRAMEWORK OF HEALTH CARE. WE'VE ALWAYS SAID WE NEVER WANTED A TWO-TIER SYSTEM. BUT WE HAVE IT ... AND A THIRD TIER, ALSO.

IN THE FIRST TIER ... THE BOTTOM TIER ... ARE UPWARDS OF 37 MILLION AMERICANS -- ABOUT 15 PERCENT OF THE POPULATION -- WHO FALL BETWEEN THE CRACKS AND HAVE NO HEALTH INSURANCE COVERAGE ... NO HIGH OPTIONS ... NO LOW OPTIONS ... NO OPTIONS AT ALL.

THEY'RE NOT OLD ENOUGH FOR MEDICARE AND NOT POOR ENOUGH FOR MEDICAID. WHAT, THEN, DOES THIS "HEALTH CARE SYSTEM" OF OURS DO FOR THE UNINSURED? IN THE VAST MAJORITY OF CASES THE ANSWER IS ... VERY LITTLE ... OR NOTHING.

THEN WE HAVE A SECOND TIER. THIS TIER RECEIVES A NARROW RANGE OF BASIC MEDICAL AND HEALTH SERVICES WITH MORE OR LESS FIXED LEVELS OF REIMBURSEMENT. THIS IS LOW-OPTION COVERAGE ... MEDICARE AND MEDICAID COVERAGE ... WITH THE PATIENT PAYING MANY COSTS OUT-OF-POCKET OR WITH THE HELP OF SOME FORM OF SUPPLEMENTAL INSURANCE, WHICH IS -- IN MY BOOK -- JUST ANOTHER KIND OF OUT-OF-POCKET EXPENSE.

FINALLY, WE HAVE THE THIRD TIER, THE TOP TIER. THE PEOPLE IN THIS TIER RECEIVE A FULL RANGE OF MEDICAL AND HEALTH SERVICES. THEY ARE COVERED BY HIGH-OPTION HEALTH INSURANCE AND ALSO HAVE A FEW DOLLARS LEFT OVER TO PAY THE 15 OR 20 PERCENT DIFFERENCE BETWEEN THE ACTUAL BILL FROM THE DOCTOR AND THE CHECK FROM THE INSURANCE COMPANY.

MANY OF OUR LARGEST BUSINESS AND INDUSTRIAL ORGANIZATIONS ARE IN THIS TOP TIER. YEARS OF TOUGH COLLECTIVE BARGAINING MADE IT POSSIBLE FOR MILLIONS OF THEIR UNIONIZED EMPLOYEES AND THEIR FAMILIES TO BE IN THAT TOP THIRD TIER.

BUT NOW IT'S NO SECRET THAT HEALTH CARE INFLATION HAS BECOME THE MAJOR STICKING-POINT IN THEIR COLLECTIVE BARGAINING, ALSO.

BUT HOW DOES THE BARGAINING END? THAT'S EASY: MORE MONEY IS PROMISED FOR EMPLOYEE HEALTH BENEFITS ... AND THE INCREASED HEALTH COSTS TRANSLATE INTO HIGHER PRICES FOR THE CUSTOMER OR THE UTILITY RATE-PAYER.

IN OTHER WORDS, EMPLOYEE HEALTH PLANS HAVE REALLY BECOME "PASS-ALONG" MECHANISMS THROUGH WHICH DOLLARS, TAKEN FROM THE POCKETS OF THE GENERAL PUBLIC IN THE OPEN MARKETPLACE, ARE PASSED ALONG AND INTO THE ⁰P_^CKETS OF THE HEALTH CARE SYSTEM.

IT'S BEEN WORKING THAT WAY FOR THE PAST 20 YEARS OR SO. BUT I DON'T THINK AMERICANS CAN KEEP FEEDING THE HEALTH CARE SYSTEM QUITE THAT WAY ANY MORE. WE'VE GOT TO MAKE SOME CHANGES.

AND BUSINESS ITSELF IS FINALLY COMING AROUND TO UNDERSTAND THIS. IT CANNOT CONTINUE TO BURY INFLATED COSTS OF HEALTH CARE IN THE PRICE-TAGS OF THEIR GOODS AND SERVICES. YOU CAN'T DO THIS AND ALSO EXPECT TO BE COMPETITIVE WITH FOREIGN GOODS, MUCH LESS OTHER AMERICAN-MADE GOODS.

IT DOESN'T MAKE SENSE TO BE TOUGH WITH THE JAPANESE, FOR EXAMPLE, BUT THEN MEEKLY GIVE YOUR HEALTH PLAN THE 10 PERCENT ... 12 PERCENT ... OR 15 PERCENT ANNUAL INCREASE IT DEMANDS.

IT MAKES NO SENSE ... AND AMERICAN BUSINESS AND LABOR LEADERS ARE FINALLY COMING TO UNDERSTAND THAT FACT OF LIFE.

THE HEALTH CARE SYSTEM IN AMERICA TODAY IS A TERRIBLE MORAL BURDEN FOR SOCIETY TO BEAR, IN THAT THE SYSTEM DOES NOT RESPOND AT ALL TO SOME 15 PERCENT OF OUR POPULATION.

AND IT IS A TERRIBLE ECONOMIC BURDEN FOR SOCIETY TO BEAR, IN THAT THE SYSTEM SATISFIES ITS OWN UNCONTROLLED NEEDS AT THE EXPENSE OF EVERY OTHER SECTOR OF AMERICAN SOCIETY.

WE NEED TO CHANGE THAT SYSTEM. NOT JUST A LITTLE CHANGE
HERE AND A LITTLE CHANGE THERE. WE NEED TO BRING ABOUT A
PROFOUND CHANGE ACROSS-THE-BOARD IN THE WAY WE MAKE MEDICAL AND
HEALTH CARE AVAILABLE TO ALL OUR CITIZENS.

BUT CAN WE DO IT?

I'D LIKE TO THINK WE CAN ... BECAUSE WE HAVE TO ... AND
BECAUSE WE'VE DONE IT BEFORE.

SOME 50 YEARS AGO, FOR EXAMPLE, WE AMERICANS KNEW THAT IT WAS MORALLY WRONG FOR OUR SOCIETY TO ALLOW ITS OLD PEOPLE TO DRIFT INTO POVERTY AND STARVATION. WE KNEW THAT WE COULD NO LONGER STAND BY HELPLESS IN THE FACE OF SUCH HUMAN MISERY.

WE WERE BETTER THAN THAT ... WE HAD TO BE BETTER THAN THAT ... BECAUSE OUR SOCIETY COULD NOT CARRY SUCH A BURDEN OF UNFAIRNESS AND STILL EXPECT TO SURVIVE AS A CIVILIZED SOCIETY.

AND SO WE ENACTED A SOCIAL SECURITY LAW TO MAKE SURE THAT EVERY AMERICAN WOULD BE ASSURED OF A MEASURE OF HUMAN DIGNITY AND RESPECT IN HIS OR HER TWILIGHT YEARS. IT WAS AN ACT OF FUNDAMENTAL DECENCY. WE KNEW WE HAD TO DO IT. AND WE DID IT.

WE MET A SIMILAR CHALLENGE MORE RECENTLY THAN THAT. BACK IN THE 1950s AND EARLY 1960s, THE PEOPLE OF THIS COUNTRY BECAME PAINFULLY AWARE OF THE TERRIBLE UNFAIRNESS OF "SEPARATE BUT EQUAL" EDUCATION.

THAT ALSO WAS A BURDEN WE KNEW AMERICA COULD NO LONGER BEAR.
IT WAS TOO GREAT A BURDEN FOR A SOCIETY THAT BELIEVED IN THE
BIBLICAL INSTRUCTION OF "JUSTICE ... JUSTICE ... ABOVE ALL,
JUSTICE."

AND SO, THROUGH OUR COURTS AND OUR LEGISLATURES, WE RELEASED
AMERICA FROM THE CRUSHING OFFICIAL, LEGAL BURDEN OF SEGREGATED
SCHOOLS. THAT'S OVER. AND THANK GOODNESS IT IS.

DID WE GET RID OF THOSE BURDENS ONCE AND FOR ALL? WELL,
NOT EXACTLY:

- * WE HAVEN'T YET SOLVED EVERY PROBLEM ASSOCIATED WITH "GROWING OLD IN AMERICA." WE KNOW THAT.
- * AND WE HAVEN'T YET PRODUCED THE PERFECT, EGALITARIAN SCHOOL SYSTEM. WE KNOW THAT, TOO.

BUT AT LEAST WE'VE LIFTED FROM THE SHOULDERS OF OUR PEOPLE A LARGE MEASURE OF THE BURDEN OF SHAME AND GUILT THAT CAME WITH DOING NOTHING. WE DID WHAT WAS MORALLY RIGHT FOR THIS COUNTRY.

AND I BELIEVE WE CAN -- AND MUST -- DO THAT AGAIN.

LET'S FINALLY SAY WHAT WE'VE HESITATED TO SAY FOR TOO MANY YEARS, AND THAT IS ... OUR CURRENT SYSTEM OF HEALTH CARE IS NOT FAIR ... IT'S NOT JUST ... AND, THEREFORE, IT IS NOT THE MORALLY STRONG SYSTEM THAT OUR SOCIETY NEEDS.

I KNOW THAT THE SENIOR SENATOR FROM MASSACHUSETTS AND A GREAT FRIEND OF THIS UNIVERSITY, SENATOR EDWARD KENNEDY, HAS DEVOTED MANY YEARS TO SUCH AN EFFORT AND WE OWE HIM AND LIKE-MINDED COLLEAGUES A DEBT OF THANKS AND A COMMITMENT TO HELP MOVE THAT EFFORT FORWARD.

I BELIEVE THIS IS SOMETHING THAT REQUIRES THE LEADERSHIP OF THE PRESIDENT. IN THE PAST, AMERICAN PRESIDENTS HAVE LOOKED ON FROM THE SIDELINES, WATCHING TO SEE WHAT THE CONGRESS OR THE HEALTH PROFESSIONS OR CONSUMER GROUPS MIGHT COME UP WITH.

THAT SIDELINE ATTITUDE DOESN'T HELP. WE NEED A PRESIDENT AND AN ADMINISTRATION THAT IS COMMITTED TO ACTION ... AND THAT AGREES TO BE ONE OF THE ACTORS.

WE NEED THE CONGRESS. WE NEED THE COMMITMENT OF BOTH PARTIES TO PROPOSE LAWS THAT ARE FAIR ... THAT WILL WORK ... AND THAT CAN BE PASSED IN BOTH HOUSES AND ACCEPTED BY THE PRESIDENT.

WE NEED THE HEALTH PROFESSIONS. I'VE BEEN HARD ON THEM IN THESE REMARKS TODAY, BUT I KNOW THEIR LEADERS AND I KNOW THAT THEIR SENSE OF FAIRNESS AND JUSTICE IS NOT ONE OUNCE LESS THAN MINE. WHAT I'M ASKING FOR TODAY IS WHAT THEY WANT, ALSO, AND I BELIEVE THEY, TOO, WOULD JOIN IN A TRULY NATIONAL EFFORT TO IMPROVE THE SYSTEM OF HEALTH CARE DELIVERY IN THIS COUNTRY.

I BELIEVE THAT THE PROFESSIONS IN PARTICULAR WOULD JOIN IN AN HONEST, NATIONAL EFFORT TO MAKE SURE THAT EVERY MAN, WOMAN, AND CHILD IN AMERICA HAS AVAILABLE -- BY RIGHT -- A BASIC ARRAY OF HEALTH AND MEDICAL SERVICE ... THAT WE HAVE ONE TIER OF HEALTH CARE IN AMERICA TO WHICH EVERYONE IS ENTITLED.

SOME PEOPLE WILL WANT MORE SERVICE AND WILL PAY FOR IT. AND THAT SHOULD BE THEIR PRIVILEGE.

BUT IT SHOULD BE THE RIGHT OF EVERY AMERICAN TO EXPECT AND TO RECEIVE ADEQUATE HEALTH SERVICE ANYWHERE IN THIS COUNTRY.

PUTTING TOGETHER SUCH A MORALLY STRONG AND FAIR SYSTEM OF HEALTH CARE WILL BE A MAJOR TASK FOR THIS COUNTRY. I HAVE NO ILLUSIONS ABOUT THAT. BUT WE MUST NOT LET SUCH CONSIDERATIONS STOP US FROM DOING WHAT WE KNOW IS RIGHT.

OTHER COUNTRIES HAVE TRIED IT AND HAVE MADE SOME HEADWAY.
WE MUST TRY, ALSO.

OUR NATION CANNOT CONTINUE TO CARRY THE BURDEN OF THE
PRESENT UNFAIR, COSTLY SYSTEM OF DELIVERING HEALTH CARE.

THE AMERICAN PEOPLE DESERVE BETTER THAN THAT. AND I
BELIEVE THE TIME HAS COME FOR US TO DEMONSTRATE THAT FACT ONCE
AGAIN BOTH TO OURSELVES AND TO THE WORLD.

IT IS A CHALLENGE TO ALL OF US ... BUT IT IS ESPECIALLY
IMPORTANT TO YOU, TODAY'S GRADUATES, AS YOU BEGIN TO PARTICIPATE
FULLY IN AMERICAN LIFE.

WE CAN -- AND WE MUST -- FIND A WAY TO HAVE BOTH EXCELLENCE
AND FAIRNESS IN AMERICAN HEALTH CARE. AND WE MUST BEGIN ... NOW
.. TO WORK TOGETHER TO ACHIEVE SUCH A SYSTEM.

IN THE WORDS OF THE PROPHET, "IF I AM NOT FOR MYSELF, WHO AM
I FOR? BUT IF I AM ONLY FOR MYSELF, WHAT AM I? AND IF NOT NOW
... WHEN?"

THANK YOU.

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